(0) N, (0) 10 M E) E)

M ED ET

E) ωJ $(\underline{\mathbb{E}})$ (10) 71 Œ)

 $\partial \mathbf{I}$

Only

STATEMENT OF FEC FORM 1 **ORGANIZATION**

			1 C F L - Conca Deserviny
1. NAME OF COMMITTEE (in full)	(Check if name is changed)	Example: If typing, type over the lines.	12FE4M5
COMMITTEE	TO ELECT F	REGILITITILIE	TON
ADDRESS (number and street)	POBOX 80	064	
(Check if address is changed)			
	COLORADO CITY	J.P.R.INGS	CD 80933 -
COMMITTEE'S E-MAIL ADDRE	SS		
(Check if address is changed)	REG@PIEGIA	LITITILE TON.	SOM
	Optional Second E-Mail A	GWS POLIFI.	com
COMMITTEE'S WEB PAGE AD	DRESS (URL)		
(Check if address is changed)	PEGL 11TITL	ETON. COM	
		111111111	
2. DATE & 3	3 3016		
3. FEC IDENTIFICATION N	JMBER ▶ C	179611-18	6
4. IS THIS STATEMENT X	NEW (N) OR	AMENDED (A)	
certify that I have examined the	nis Statement and to the bes	st of my knowledge and belief	it is true, correct and complete.
Type or Print Name of Treasure	MARJORI	6 KLEIN (0:4)	
Signature of Treasurer	Perpirest	Sein_	Date 01 20 2014
NOTE: Submission of false, erron	eous, or incomplete information	n may subject the person signir ATION SHOULD BE REPORTE	g this Statement to the penalties of 52 U.S.C. §30109. D WITHIN 10 DAYS.
Office Use		For further information Federal Election Comm	

Toll Free 800-424-9530

Local 202-694-1100

t

5.

TYPE OF COMMITTEE Candidate Committee:						
(a) X	This committee is a principal campaign committee. (Complete the candidate information below.)					
(b)	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the candidate information below.)					
Name of Candidate PEG LITTLETON						
Candidate Party Affilia	ion REP Office State State State District					
(c)	This committee supports/opposes only one candidate, and is NOT an authorized committee.					
Name of Candidate						
Party Co	(Namacratic					
(d)	This committee is a (National, State or subordinate) committee of the Republican, etc.) Party.					
Political Action Committee (PAC):						
(e)	This committee is a separate segregated fund. (Identify connected organization on line 6.) Its connected organization is a:					
	Corporation Corporation w/o Capital Stock Labor Organization					
	Membership Organization Trade Association Cooperative					
	In addition, this committee is a Lobbyist/Registrant PAC.					
(f) [m]	This committee supports/opposes more than one Federal candidate, and is NOT a separate segregated fund or party committee. (i.e., nonconnected committee)					
	In addition, this committee is a Lobbyist/Registrant PAC.					
	tn addition, this committee is a Leadership PAC. (Identify sponsor on line 6.)					
Joint Fundralsing Representative:						
(g)	This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, at least one of which is an authorized committee of a federal candidate.					
(h) This committee collects contributions, pays fundraising expenses and disburses net proceeds for two or more political committees/organizations, none of which is an authorized committee of a federal candidate.						
Committees Participating in Joint Fundraiser						
1.	FEC ID number C					
2.	FEC ID number C					
3.	FEC ID number					
4.	FEC ID number C					

FEC Form 1 (Revised 02/2009)			Page 3
Write or Type Committee Name			
6. Name of Any Connected Organization, Affilia	ated Committee, Joint Fund	raising Representative, or	Leadership PAC Sponsor
		1	
Mailing Address			
	CITY	STATE	ZIP CODE
Relationship: Connected Organization	Affiliated Committee	Fundraising Representative	Expense Leadership PAC Sponsor
 Custodian of Records: Identify by name, addresses books and records. 	ss (phone number optiona	and position of the person	on in possession of committee
Full Name MARTOREE			
Mailing Address PO BOX	. 8064		
رله			
ICOLORA	do sprine	51 CO	1809.331-LL
Title or Position	CITY	STATE	ZIP CODE
TREASURER	<u> </u>	lephone number 86	31-2461-27161
Treasurer: List the name and address (phone name any designated agent (e.g., assistant treasurer).	umber optional) of the trea	asurer of the committee; an	d the name and address of
Full Name of Treasurer MARTORIE	KLEIN	+ 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
Mailing Address	(18064)		
ــــــــــــــــــــــــــــــــــــــ	1		لتستنسيا
COLORA	LDO SPRING	SI LU I	ZIP CODE
Title or Position TREASURER	<u>j i j j</u> Tel	ephone number Bo	31- 546 -672161

CITY

STATE

ZIP CODE

Page 4

FEC Form 1 (Revised 02/2009)



CPU U.S. POSTAGE

\$ 4.650 .ED JAN 21 2016 80917

A STANDARD OF STAN The the state of t Office of Public Records P.O. Box 77578 Washington, D.C.

30437578

K, MACCALLUM
SUPERINTENDENT
ART SENATE OFFICE BUILDING
SUITE 232
WASHII TON, OC 20510-71:
PMC 12] 224-0322

United States Senate

OFFICE OF THE SECRETARY

OFFICE OF PUBLIC RECORDS

THE PRECEDING DOCUMENT WAS:	
HAND DELIVERED	
USPS FIRST CLASS MAIL Date of Receipt	Postmark
USPS REGISTERED/CERTIFIED Postmark	
USPS PRIORITY MAILPostmark	
DELIVERY CONFIRMATION OR SIGNATURE CONFIRMATION LA	BEL
USPS EXPRESS MAIL Postmark	
OVERNIGHT DELIVERY SERVICE:	
SHIPPING DATE NEXT BUSINESS DAY DELIVERY	
FEDERAL EXPRESS	
UPS	
DHL	
AIRBORNE EXPRESS	
RECEIVED FROM FEDERAL ELECTION COMMISSION Date of Rec	eipt
POSTMARK ILLEGIBLE POSTMARK	
FAX	
Oate of Receipt	
OTHER	
Date of Receipt or Postmark	2-2-16
PREPARER DATE PREPARED	6-6-10

M



SEN PATCH



SEN PATCH